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## APPLICANTS

Bernard Bene, Irigny, FRANCE;  
 Georges Vantard, Villefontaine, FRANCE;  
 Carl W Reitz, Riehen, SWITZERLAND;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/IB03/03745 09/04/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

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\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
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Foreign Priority claimed 35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FRANCE	SHEETS DRAWINGS 7	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 2
Verified and Acknowledged /MARJORIE ELLEN CHRISTIAN/ Examiner's Signature		Initials				

## ADDRESS

FINNEGAN, HENDERSON, FARABOW, GARRETT & DUNNER  
 LLP  
 901 NEW YORK AVENUE, NW  
 WASHINGTON, DC 20001-4413  
 UNITED STATES

## TITLE

Control apparatus and control method for a blood treatment equipment

FILING FEE RECEIVED 3540	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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